

RUNCORN RURAL DISTRICT



Annual Report

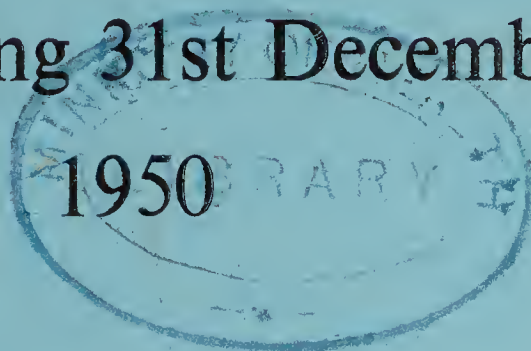
OF THE

Medical Officer of Health

FOR THE

Year ending 31st December

1950



RURAL DISTRICT AUTHORITY OF RUNCORN

ANNUAL REPORT

1 9 5 0

by

E. N. HILLMAN GRAY, L.R.C.P. & S., L.M., D.P.H.
MEDICAL OFFICER OF HEALTH
RUNCORN URBAN AND RURAL DISTRICTS

OFFICIALS OF PUBLIC HEALTH DEPARTMENT :

- (1) Medical Officer of Health, Runcorn Urban and Rural Districts**
- (2) Divisional Medical Officer of Health**
Divisional School Medical Officer (Runcorn Division)

E. N. HILLMAN GRAY, L.R.C.P. & S., L.M., D.P.H.
(Office Tel. No.: Frodsham 2186
Home Tel. No.: Frodsham 2312)

Sanitary Inspectors and Meat and Food Inspectors :

D. BOOTHMAN, M.S.I.A., Senior Sanitary Inspector
National Certificate in Building
Certified Sanitary Inspector (R.S.I. and S.I.E.J.B.)
Certified Inspector of Meat and other Foods (R.S.I.)
Offices: Public Health Department, Castle Park, Frodsham.
Tel. No.: Frodsham 2186
Sub-Office, 22 Orchard Street, Stockton Heath.
Tel. No.: Stockton Heath 1024
Home: Tel. No.: Frodsham 2219

G. F. SIXSMITH, Additional Sanitary Inspector
Certified Sanitary Inspector (R.S.I. and S.I.E.J.B.)
Certified Inspector of Meat and other Foods (R.S.I.)
Home Tel. No.: Warrington 2824

Clerk/Pupil Sanitary Inspectors :

J. ANDREWS (transferred to Clerk of the Council's Department,
28th August, 1950)
P. MOSS
E. H. PEET (appointed 23rd October, 1950)

Clerical Duties :

MRS. B. GOLDER

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AN APPEAL TO ALL CONCERNED, ESPECIALLY TO VOLUNTARY SOCIETIES, IS AGAIN MADE TO MAKE FULL USE OF THIS REPORT; DISCUSSION GROUPS, ETC., IN HEALTH EDUCATION SHOULD BE ARRANGED FOR IN THE INTERESTS OF PUBLIC HEALTH AT FREQUENT INTERVALS.

SPECIAL ATTENTION IS DRAWN TO APPENDIX A

RURAL DISTRICT COUNCIL OF RUNCORN, 1950

From 23rd May, 1950

Chairman of the Council:

COUNCILLOR R. E. PAYTON, J.P.

Vice-Chairman of the Council:

COUNCILLOR J. HUNT

Health Committee:

COUNCILLOR G. WILLIAMS, *Chairman*

COUNCILLOR H. PEAKE, J.P., *Vice-Chairman*

Councillor W. H. CAPPER, J.P. Councillor W. S. LOOKER

„ D. L. DAVIES	„ H. PEACOCK
„ H. R. DONE	„ Mrs. E. STANSFIELD, J.P.
„ H. HILL	„ G. S. WALLWORTH, J.P.
„ J. W. KIRKHAM	„ E. G. WHITE
	„ C. WILKINSON

and Chairman and Vice-Chairman of the Council

OFFICERS:

Solicitor/Clerk of the Council:

Mr. R. PATRICK WILLIAMS, Frodsham

Engineer and Surveyor:

Mr. A. J. KING, A.M.I.C.E., M.I.M. & Cy.E., Frodsham

INTRODUCTION

TO THE CHAIRMAN AND MEMBERS OF THE
RURAL DISTRICT COUNCIL OF RUNCORN.

Ladies and Gentlemen,

This Report is rendered in accordance with the wishes of the Ministry of Health, i.e., Circular 2/50 dated 25th January, 1950.

Taking into consideration the conditions created by the shortage of housing accommodation, the general health of the community is satisfactory for the moment.

When various matters recommended in this Report are put into effect, health (mental and physical) should greatly improve provided *all* concerned co-operate, i.e., “team work”.

Proper housing conditions, good food, varied diet and further health education are urgently required.

Special attention is drawn to Appendix “A”—“THE COMMON SENSE PREVENTIVE MEASURES AGAINST DISEASE”—this is one of the excellent ways of furthering Health Education and has been distributed to, e.g., most factories, voluntary societies, schools, libraries and householders in the district.

Annual Report, 1950—Divisional Medical Officer of Health, Runcorn. By agreement with the Cheshire County Council and my local Councils, this Report is included as an Appendix “B” and attached hereto.

The co-operation and help of *all* concerned outside my offices, in the Public Health Department and other departments, has been greatly appreciated by me in the carrying out of my various duties—without the “team spirit” it would be difficult to obtain results.

I beg to remain,

Your obedient Servant,

E. N. HILLMAN GRAY,

Medical Officer of Health.

SECTION A

STATISTICS AND SOCIAL CONDITIONS OF THE AREA

(a)	Area (in acres)	....	....	....	....	....	45,765
(b)	Estimated population (Registrar-General)	....	....				35,580
(c)	Number of inhabited houses (end 1950) according to the Rate Books	....	....	....	....		10,530
(d)	Rateable value of the District (end 1950)	....	....				£215,404
(e)	Sum represented by one penny rate (approx.)	....					£865
(f)	Density of Population. Number of persons per acre (estimated population)	....	....	....	....		.77
(g)	Average number of persons per inhabited house (estimated population)	....	....	....	....		3.37

Social Conditions

Agriculture and dairy farming are the chief industries of the district; other industries are tanneries, electric cable, electric fittings and steel tubes works, flour mills and jam works. Sand quarrying is being carried on in the district, chiefly at Whitley and Moore.

Parts of the district are mainly residential.

Unemployment.—Exact statistics are not available for this area as the figures obtained by the local offices of the Ministry of Labour related to the areas served by such offices and these areas are not identical with the Runcorn Rural District. The incidence of unemployment, however, was low in the area.

Many of the inhabitants are employed in industrial areas outside the district. Others are employed on the railways and as porters in canal warehouses.

Children's homes and sanatoria.—There is a National Children's Home at Frodsham (270 children), one open-air Convalescent School for Jewish Children at Norley; two sanatoria at Manley each accommodating about 300 persons (nursing staff being available).

Welfare Centres (Cheshire County Council).—At present there is a Welfare Centre (fully staffed) at Helsby, Frodsham, Stockton Heath, Grappenhall and Antrobus. A Welfare Centre will be opened in Kingsley in 1951.

VITAL STATISTICS

			<i>Total</i>	<i>M.</i>	<i>F.</i>
Live Births—Legitimate	....	....	476	245	231
Illegitimate	....	....	19	8	11
			<hr/>	<hr/>	<hr/>
			495	253	242
Birth rate per 1,000 of the estimated resident population	....				13.91
Still Births—Legitimate	....	....	6	2	4
Illegitimate	....	....	1	1	0
			<hr/>	<hr/>	<hr/>
			7	3	4
Rate of Still Births per 1,000 total (Live and Still births): 13.94.					
Deaths	....	....	....	....	....
			381	200	181
Death Rate per 1,000 of the estimated resident population	....				10.72

Deaths from Puerperal Causes

(Heading 30 of the Registrar-General's Short List):

No. 30 Pregnancy, childbirth, abortion.....Nil

Death Rate of Infants Under One Year of Age

All Infants per 1,000 live births (10 deaths)	....	Death Rate	20.20
Legitimate Infants per 1,000 legitimate live births	....	....	21.00
Illegitimate Infants per 1,000 illegitimate live births	....	....	52.63

Particulars of any Unusual or Excessive Mortality during the year which has received or required comment

The causes of the highest mortality were:

Heart Disease	....	150	(<i>Vide</i> Registrar-General)
Cancer	....	60	„

Heart Disease was prevalent in persons over 65 years of age, some cases may have been due to the effects of e.g., Rheumatism in childhood—this is being further investigated under the auspices of the Ministry of Health (lack of vitamin C, gland deficiency, etc.).

For further remarks on Cancer see page 32 (i.e., further research, early treatment, etc.).

COMPARISON RATES

Year	Population	Birth Rate	Death Rate	Infantile Mortality Rate
1940	32,790	13.2	12.8	37
1941	33,000	12.28	10.53	39
1942	33,000	14.2	11.2	29.6
1943	33,000	15.7	11.5	46.5
1944	33,000	18.24	10.55	34.54
1945	31,710	15.5	11.07	32.58
1946	32,760	16.9	11.69	32.43
1947	32,930	16.85	11.93	48.6
1948	34,230	15.37	11.08	36.13
1949	34,550	11.75	11.92	27.66
1950	35,580	13.91	10.72	20.20

(Population figures for 1941-1944, estimate only.)

A table on page 29 gives the Birth Rate, Death Rate and analysis of mortality during the year 1950 and comparisons with England and Wales, London and the other great and smaller towns.

There were 269 deaths of persons over 65 years of age.

			M.	F.	Total
From 65-69	Number of Deaths	....	28	23	51
„ 70-79	„ „ „	....	67	56	123
„ 80-89	„ „ „	....	37	43	80
„ 90-99	„ „ „	....	4	11	15

Summary of Deaths of Infants under 1 year of age

1 (a)	Broncho-pneumonia	....	....	Male aged 1 month
1 (a)	Prematurity; (b) 32 weeks of pregnancy, weight 2lb. 12oz.....	....	....	Female aged 2 days
1 (a)	Acute Gastro-Enteritis	....	....	Female aged 3 months
	Asphyxia caused when the neck and teat of a feeding bottle became lodged in the mouth	....	....	Female aged 3 months
1 (a)	Broncho-pneumonia, II. Prematurity	....	....	Male aged 2 weeks
1 (a)	Asphyxia; (b) Atelactasis of lung. II. Patent ductus arteriosus	....	....	Male aged 15 hours
1 (a)	Intracranial Haemorrhage			
	(b) Prematurity, weight 3lb. 10oz.			
	(c) Premature separation of the placenta due to severe toxæmia of pregnancy, P.M.	....	....	Male aged 1 day
1 (a)	Haemolytic disease of the newborn II. Prematurity	....	....	Male aged 3 days
1 (a)	Acute laryngo-tracheo Bronchitis	....	....	Male aged 11 months
1 (a)	Prematurity, 26 weeks			
	(b) weight 1lb. 9oz.	....	....	Female aged 1 day

Prevention of any Unusual or Excessive Mortality—Children

Treatment in a General Hospital or an Infectious Disease Hospital, etc., is available for all such cases if any Doctor decides that treatment will benefit, and the patient is fit to be moved. Premature births are specially treated in Hospital or Nursing Homes. District Nurses assist in nursing at home (via the patient's own doctor).

The above is in addition to Health Education, Welfare Schemes and Clinics, etc.

SECTION B GENERAL PROVISIONS OF HEALTH SERVICES FOR THE AREA

1. Public Health Officers

The names and qualifications, districts, addresses and telephone numbers are given at the beginning of the Report.

2. Laboratory Facilities

The Biological Institute of Messrs. Evans Medical Supplies is established in Runcorn. The Institute can supply serum for cases of Anthrax *in emergency*.

With the facilities given by the Public Health Laboratory, Hamilton Square, Birkenhead, the Public Health Laboratory, Monsall Hospital, Newton Heath, Manchester, and the Public Health Laboratories at Warrington and Chester Royal Infirmaries, also various General Hospital Laboratories, all concerned will now be able to make fuller arrangements for pathological overhauls *so essential* in certain cases. It is hoped that this extended service will give all concerned further facilities in the investigation of infectious disease and disease generally (e.g., by pathological overhauls).

Milk is sent to the Public Health Laboratory, Hamilton Square, Birkenhead.

V.D. specimens are sent to the laboratories mentioned above, as required.

SECTION C

1. Water

(i) The water supply of the area has been satisfactory both in quality and quantity, with the exception of isolated farms and houses not on a mains supply.

(ii) Mains supplies and results of chemical analyses and bacteriological examinations are as follows. Parishes refer to the main areas; outlying portions of parishes may be connected to other mains.

Alvanley and Helsby—by the Council from Helsby Wells.

Dutton, Kingsley, Norley, Preston Brook and Sutton—by the Council from Liverpool (Vyrnwy) bulk supplies.

Frodsham, Manley, Antrobus and Whitley—by the Council from Warrington Corporation bulk supplies.

Stockton Heath, Grappenhall, Walton, Appleton, Stretton, Moore, Daresbury—by Warrington Corporation.

Halton and Clifton—by Runcorn and District Water Board.

Aston and Norton—by private estate mains, the bulk supply being Liverpool (Vyrnwy).

Budworth—by the Council from Mid and South East Cheshire Water Board bulk supplies.

<i>Chemical Analyses</i>	<i>Helsby Wells (no treatment) to Alvanley, Helsby</i>	<i>Warrington Harrol Edge to Frodsham, Manley,</i>	<i>Liverpool Vyrnwy to Aston, Dutton, Kingsley, Norley, Norton, Preston Brook, Sutton</i>	<i>Runcorn and District Water Board to Halton</i>	<i>Warrington Vyrnwy mixed to Stockton Heath Area and most other Parishes</i>	<i>Mid and South-East Cheshire Water Board to Budworth Village and Ball Lane, Kingsley</i>
Date	24.5.50	15.11.50	15.11.50	16.1.47	22.11.50	1.10.48
Appearance	Clear and Colourless	Clear and Colourless	Clear and slight yellow	Clear and slight yellow	Clear and slight yellow	Clear and Colourless
Odour	Nil	Nil	Nil	Nil	Nil	Nil
Reaction	pH 7.4	pH 7.0	pH 6.4	pH 6.9	pH 6.3	pH 7.1
<i>Parts per million</i>						
Total solids	304	188	50	37	63	Not given
Nitrogen as free and saline ammonia	0.00	0.00	0.00	0.12	0.00	Nil
Nitrogen as albuminoid ammonia	0.005	0.00	0.04	0.03	0.03	Nil
Nitrogen as nitrites	Nil	Nil	Nil	Nil	Nil	Nil
Nitrogen as nitrates	1.1	2.25	0.00	0.25	0.2	4.0
Chlorides as Cl.	40	30	9	10	10	21
Oxygen absorbed from permanganate in four fours at 27° C.	0.028	0.06	3.03	2.79	3.5	0.01
Total hardness	200	130	30	30	30	150
Temporary hardness	175	96	12	12	12	84
Permanent hardness	25	34	18	18	18	66
Alkalinity as CaCO ₃	175	96	12	Nil	12	Not given
Free chlorine	Nil	Nil	Nil	Nil	Nil	Nil
Poisonous metals	Absent	Nil	Nil	Nil	Lead 0.15 Zinc nil, Copper little trace	Absent
<i>Bacteriological Examination:—</i>						
Date	19.12.50	14.11.50	14.11.50	17.1.50	28.3.50	14.3.50
Probable number of coliform bacilli per 100 m.l.	Nil	Nil	5	1	Nil	Nil
% of above faecal coli Report	Good	Good	Good	Satisfactory	Good	Good

Analyst's Opinion

Helsby 24.5.50.—The chemical analysis of this water is satisfactory.

Warrington Harrol Edge 15.11.50.—The chemical analysis of this water is satisfactory and of great organic purity.

Liverpool Vyrnwy 15.11.50.—The chemical analysis of this water is satisfactory and contains only organic matter found present from an upland gathering ground.

Runcorn and District Water Board 16.1.47.—The chemical and bacteriological conditions are satisfactory.

Warrington Vyrnwy mixed 22.11.50.—This water is of satisfactory chemical quality. Poisonous metals are negligible.

Mid and South-East Cheshire Water Board 6.3.51.—The chemical analysis of this water is satisfactory.

(iii) Private water supplies are bacteriologically examined at least once per year. Where, as a result of such sampling, the supplies have been established as unsatisfactory, Notices advising that the water be boiled or chlorinated before drinking, dietetic and dairy purposes are sent and repeated quarterly to the owners and occupiers.

A list of all properties not on a mains supply and the quality of their existing supply was forwarded to the Ministry of Health and County Medical Officer of Health in 1945. The Council's schemes to bring mains supplies to some of these properties under the provisions of the Rural Water Supplies and Sewerage Act, 1944, had not received approval for grants but towards the end of the year the Ministry of Health asked for re-submission with up-to-date prices.

Where farms and farm cottages are concerned, the owners are strongly advised to obtain a mains supply with the assistance of the Cheshire Agricultural Committee under the Agricultural (Misc. Prov.) Act, 1944, Sec. 5.

Two milk-producing farms have been given mains supplies under such a scheme. Ten other houses and one camping site have been connected to mains supplies.

(iv)

Parish	(a) Public Water Mains				(b) Private Supplies					
	Direct to house		Standpipes		Private Water Mains		Wells and Springs			
							Good Quality		Suspicious or unsatisfactory Quality	
	Houses	Population	Houses	Population	Houses	Population	Houses	Population	Houses	Population
Alvanley	78	265	2	5	—	—	2	6	2	6
Antrobus	206	665	1	5	—	—	1	3	6	18
Appleton	900	2930	—	—	—	—	2	5	1	3
Aston	43	127	—	—	27	87	—	—	2	4
Budworth (Great)	112	358	—	—	—	—	—	—	—	—
Daresbury	65	213	—	—	—	—	4	14	3	10
Dutton	86	403	—	—	—	—	1	3	—	—
Frodsham	1552	5154	1	3	—	—	1	3	2	13
Grappenhall	1758	5815	—	—	—	—	—	—	—	—
Halton	440	1621	—	—	—	—	—	—	—	—
Hatton	87	298	—	—	—	—	4	12	1	4
Helsby	811	2760	—	—	—	—	—	—	—	—
Kingsley	320	1243	20	64	—	—	2	6	13	41
Manley	133	601	—	—	—	—	1	5	6	20
Moore	156	512	—	—	—	—	—	—	—	—
Norley	274	947	—	—	—	—	1	4	2	5
Norton	16	57	—	—	22	73	3	10	—	—
Preston Brook	100	334	—	—	1	4	—	—	10	35
Stockton Heath	2237	7380	—	—	—	—	—	—	—	—
Stretton	129	452	—	—	—	—	—	—	2	7
Sutton	204	682	—	—	—	—	—	—	—	—
Walton	507	1708	—	—	—	—	2	7	1	3
Whitley	161	548	4	13	—	—	—	—	2	6
Totals	10375	35073	28	90	50	164	24	78	53	175

(2) Drainage and Sewerage

The sewerage and sewage disposal scheme for Sutton received approval by the Ministry of Health largely on account of the need for satisfactory drainage for the new Council houses. The total contract price was £32,306. 14s. 6d. and the scheme was commenced late in the year.

A detailed survey of Kingsley and Norley for sewerage and sewage disposal was commenced.

A report is being prepared on the Frodsham pumping plant and works.

The ten-year programme decided by my Council in 1945 is as follows:—

1. Frodsham—installation of new pumping plant at sewage pumping station.
2. Helsby—new intercepting sewer and sewage disposal works extension.

3. Great Budworth—sewers and sewage disposal works.
4. Stretton—sewer extension and pumping station.
5. Acton Grange sewage outfall works extensions, Moore sewer extensions and pumping station and Appleton sewer extension.
6. Kingsley and Norley—sewers and sewage disposal works.
7. Alvanley—sewer extensions.

When septic tanks are installed it is important that adequate filtration or subsoil irrigation is provided to prevent pollution of watercourses and ditches. In addition, the septic tanks should be maintained and desludged at regular intervals. Many inspections have been carried out in connection with existing installations and in giving advice on new proposed works.

Three drainage systems were connected to the sewer.

3. Rivers and Streams

Pollution of streams and ditches tends to increase owing to the erection of new houses, improved sanitary appliances to existing houses and improved milk and dairy technique in parishes without sewers. Private owners are advised on the best type of septic tanks and filters for their property. Where such properties are in groups, the only final satisfactory solution is the provision of a sewer and sewage disposal works. Liquor from cowsheds presents a particularly difficult problem where it is not collected and returned to the land as manure.

Pretreated effluents from two tanneries at Grappenhall are received into the Council's sewer.

The pollution of the non-tidal section of the Manchester Ship Canal is being reported to the appropriate authority after investigation.

(4) Closet Accommodation

Thirty-two conversions to the water carriage system were carried out. Where this has been done voluntarily by the owners the Council has, when requested, paid grants up to £10, provided that where a public sewer is not available, the owners will at their own expense connect to a public sewer when it becomes available.

(5) Public Cleansing

This is carried out by the Engineer and Surveyor under direct labour. Disposal is by tipping, *which should be "controlled."* To

assist in achieving full controlled tipping, small tips which are used infrequently and which cannot be supervised continually, should be, where possible, discontinued.

Cobbs Tip, Appleton, was filled and closed during the year. A new tip was opened at Stockport Road, Thelwall. A more satisfactory method of collection and disposal of the contents of pail closets is required.

D.D.T. or Gammexane types of insecticide should be used on tips as and when required, especially in warm weather.

6. Sanitary Inspection of the Area

The following tabular statement is furnished by the Senior Sanitary Inspector under Article 27 (18) of the Sanitary Officers' (outside London) Regulations, 1935, or Article 19 of the Sanitary Officers' Order, 1926:—

<i>Nature of Inspections</i>	<i>No. of Inspections</i>	<i>Informal Notices</i>	<i>Statutory Notices</i>
Dwelling Houses (Housing Acts)	6	—	1
Dwelling Houses (No. of Inmates and queries re Council house applications)	185	—	—
Dwelling Houses (Public Health Act)—			
(a) Roofs, gutters and rain-water pipes	168	56	29
(b) Drains and sanitary fittings	183	61	13
(c) Other defects	198	66	30
(d) W.C.s and other closets	51	17	2
Schools	44	3	—
Moveable Dwellings	127	37	—
Water Supplies (Samples)	117	—	—
(Other Inspections)	79	12	—
Closet Conversions	94	11	—
Cesspools and Settling Tanks	88	38	29
Premises connected to sewer	12	3	—
Ditches, Brooks	36	13	1
Sewers	54	22	28
Colour Tests (sewers and drains)	50	—	—
Refuse Collection and Disposal	93	8	—
Streets, Yards and Passages	44	20	4
Foul Accumulations	22	17	—
Tipping on Waste Land	35	356	1
Vermin (Rats and Mice)	90	6	—
(Insects)	41	2	—
Piggeries	14	5	—
Dairies and Milk Retailers	41	2	—
Milk Samples	41	—	—

Factories and Workshops	....	....	....	75	7	—
Shops and Foodstores	....	....	....	113	19	—
Bakehouses	....	....	....	11	2	—
Meat and Food Inspection	....	....	....	40	—	—
Canal Boats	....	....	....	—	—	—
Zymotic Inquiries	....	....	....	84	—	—
Visits to Contacts and Schools	....	....	....	153	—	—
Mortuaries	....	....	....	18	—	—
Petrol Stores	....	....	....	18	3	—
Hutted Camps	....	....	....	23	—	—
Miscellaneous	....	....	....	48	11	—
Sewage Survey of Kingsley and Norley	....	....	....	343	—	—
Totals	....	....	....	2839	797	138

SHOPS

7. Shops Act, 1934

No. employing persons	....	....	....	....	....	127
No. employing members of own family only	....	....	....	....	....	189
						316

Of these Shops :

No. selling food	....	....	....	....	....	235
No. registered under	(1) Manufacture and sale of ice-					
Food and Drugs Act	cream (hot mix, 4; cold mix, 8)					12
1938, Section 14)	(2) Sale only of ice-cream					43
	(3) Preparation of preserved foods					44

(8) Smoke Abatement

The Council remains a constituent Authority with the Manchester Regional Smoke Abatement Committee and makes a contribution to its fund for providing special Smoke Inspectors.

Action by the appropriate Government Departments in supplying only the proper means of burning good coal, etc., in the house, factory, etc., would go a long way in reducing the nuisance.

Noxious odours were at times noted in the district arising from two large industrial works outside the district. Observations were maintained and the matter was taken up with the firms concerned and H.M. Alkali Inspector. Some improvement was effected. This matter will be followed up.

(9) Rats and Mice Destruction

The Council operates under direction of the Ministry of Agriculture and Fisheries (Local Authorities circular N.S.19).

The Senior Sanitary Inspector acts as Rodent Officer—one full-time rodent operator is employed. The Council co-operates with the Cheshire Agricultural Executive Committee who carry out rodent destruction on agricultural premises.

Treatment was offered to industrial premises at a charge of cost of labour and materials, five of these, schools, and two cooking depots, receive treatment as required on this basis—15 others preferred to enter into contracts as before. Dwelling houses receive free treatment unless the infestation is due to lack of hygiene or the unsatisfactory keeping of animals or poultry, in which case a charge is made.

The Council has 19 tips, sewage outfalls and properties which receive treatment as required. The sewer systems in Appleton, Daresbury, Frodsham, Grappenhall, Halton, Helsby, Moore, Stockton Heath and Walton, were test-baited and infestation was found in Appleton, Frodsham, Grappenhall, Helsby, Moore and Stockton Heath, to a limited degree. The infested portions received two maintenance treatments.

(10) **FACTORIES ACTS, 1937 and 1948**
Home Office Form 572. (Revised)

1. Inspections for purposes of provisions as to health, including inspections made by Sanitary Inspectors :

<i>Premises</i>	<i>Number on Register</i>	<i>Inspec- tions</i>	<i>Written notices</i>	<i>Occupiers Prosecuted</i>
(i) Factories in which Sections 1, 2, 3, 4, and 6 are to be enforced by Local Authorities.	42	17	—	—
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority.	88	50	7	—
(iii) Other premises in which Section 7 is enforced by the Local Authority (excluding out workers' premises')	15	8	—	—
TOTAL	145	75	7	—

2. Cases in which defects were found

<i>Particulars</i>	<i>Number of cases in which defects were found.</i>			<i>Number of cases in which prosecutions were instituted</i>
	<i>Found</i>	<i>Remedied</i>	<i>Referred To H.M. by H.M. Inspector Inspector</i>	
Want of Cleanliness (S.1.)	1	1	—	—
Overcrowding (S.2)	—	—	—	—
Unreasonable temperature (S.3)	—	—	—	—
Inadequate ventilation (S.4)	—	—	—	—
Ineffective drainage of floors (S.6)	—	—	—	—
Sanitary Conveniences (S.7)				
(a) insufficient	9	9	—	1
(b) Unsuitable or defective	37	36	—	2
(c) Not separate for sexes	—	—	—	—
Other offences against the act (not including offences relating to Outwork.)	—	—	—	—
TOTAL	47	46	—	3

All factories are entered in the register kept for the purpose. Number of Outworkers—8, employed in the making of wearing apparel. No action taken during the year.

11. Swimming Baths

There are no Public Swimming Baths in the District.

12. Moveable Dwellings

Close supervision was maintained on camping sites and individual moveable dwellings. Applications now require approval under the Town and Country Planning Act, 1947, which gives better control as regards amenity to the district than the Public Health Act. Owing to the lack of housing accommodation, a number of people have applied for licences to use caravans as permanent dwellings. The Council adopted the recommendations of the County Planning Officer on new camping sites which include the following:—

“The use of the said property as a camping ground shall mean its use as pitches for:—

(i) tents covering an area not exceeding 100 sq. ft. each, or

(ii) caravans on wheels specially built for use as living accommodation and maintained in a fit state to be drawn or propelled on their own wheels on the public highway. No railway carriage, tram-car, omnibus body or other similar article, whether on wheels or not and howsoever adapted shall be permitted to be stationed or erected on the said property.”

CAMPING SITES

Number of licences in operation, Public Health Act, 1936, Section 269:—

	<i>Year of 1950</i>
(a) For Camping Sites	11
(b) For fixed type dwellings sited on above Camping Sites	8
(c) For other individual moveable dwellings	35
Estimated maximum number of Campers resident in the area at one time, during the summer season, 1950	372

13. Eradication of Bed Bugs

The following particulars are given of action taken for the eradication of bed bugs:—

	<i>Infested</i>	<i>Disinfested</i>
(a) Number of Council Houses	0	0
(b) Number of other Houses	3	3

No action was required on dwellings of persons allocated Council Houses.

14. Schools

During the year 44 inspections (as allowed by the Public Health Act) of public elementary schools, have been made. The water supply is good and adequate, but repairs and improvements are required at many schools. Certain urgent maintenance repairs were asked for and carried out. Automatic flushing of urinals is required in some cases, also attention to dusty, badly surfaced playgrounds.

The County Medical Officer of Health, Cheshire, has reported on schools (in and outside) direct to the Director of Education, C.C.C.

15. Mortuaries

The mortuaries controlled by the Council at Frodsham and Stockton Heath are in a satisfactory condition.

SECTION D—HOUSING

1. New Houses in 1950

Number of new houses erected by Local Authority	62
Number of new houses erected by other bodies and persons	13
TOTAL	75

<i>Parishes</i>	<i>New Houses erected 1950 Total per Parish</i>		<i>No. of inhabited houses in Rural District 31st Dec. 1950.</i>
	<i>Private</i>	<i>Local Authority</i>	
Alvanley	—	—	84
Antrobus	1	—	214
Appleton	2	12	903
Aston	—	—	72
Budworth (Great)	—	—	112
Daresbury	—	—	72
Dutton	—	2	87
Frodsham	2	—	1556
Grappenhall	2	—	1758
Halton	1	16	440
Hatton	—	—	92
Helsby	1	24	811
Kingsley	—	8	355
Manley	—	—	140
Moore	—	—	156
Norley	1	—	277
Norton	—	—	41
Preston Brook	—	—	111

Stockton Heath	....	....	....	—	—	....	2237
Stretton	....	....	....	—	—	....	131
Sutton	....	....	....	—	—	....	204
Walton	....	....	....	—	—	....	510
Whitley	....	....	....	3	—	....	167
TOTALS				13	62	....	10530

2. Housing

The acute shortage of dwelling houses continues, there being 1,600 applicants for Council houses in the district. The Council is making every effort to build as rapidly as possible. This department has continued to investigate applications for Council houses, where, under the Council's Points Scheme, points are allocated for tuberculosis or other illnesses affected by housing conditions; overcrowding (based on the Overcrowding Act, but excluding one living-room) and the sanitary conditions of the existing accommodation.

Under the Rural Housing Survey, 378 houses were classified suitable for demolition only (Category 4); 1,042 were classified as requiring complete reconditioning (Category 3). In a few cases where owners have carried out extensive repairs, the Council has given undertakings that, provided the houses are maintained in a reasonable state of repair, demolition orders will not be made effective for five to ten years.

Owing to the high cost of repairs, difficulty was experienced in enforcing repairs under the Public Health Acts, especially to the older types of properties.

3. Emergency Accommodation

The converted ex-army huts at Aston Lane Camp, Sutton, comprising 17 family units, and Townfield Lane Camp, Frodsham, comprising 8 family units, are still in use and are providing useful emergency accommodation. They are maintained in good condition and have been allocated to families in urgent need of accommodation or who do not qualify under the Council's Points Scheme for permanent houses.

4. Housing Act, 1936—Part IV—Overcrowding

		1949	1950
(a)	i. Number of dwellings overcrowded at the end of the year	23	22
	ii. Number of families dwelling therein	32	30
	iii. Number of persons dwelling therein	196	189
(b)	i. Number of new cases of overcrowding reported during the year	6	1

(c)	i.	Number of cases of overcrowding relieved during the year	....	....	....	28	2
	ii.	Number of persons concerned in such cases	196	-		15	
(d)	i.	Particulars of any cases in which dwelling-houses have become overcrowded after the Local Authority has taken steps for the abatement of overcrowding	....			Nil	Nil

SECTION E

INSPECTION AND SUPERVISION OF FOOD

1. Milk and Dairies

Numbers on the registers are:—

Dairies	....	....	....	5
Distributors	....	....	....	17
Dealers	....	....	....	9
Supplementary	....	....	....	7

Samples taken were submitted to the Public Health Laboratory, Birkenhead, and comprise the following:—

No. of samples methylene blue and coliform test	....	....	28
No. of these samples unsatisfactory	....	....	6*
No. of samples examined for the presence of Tubercle Bacilli	....	....	13
No. of these samples found to contain Tubercle Bacilli	....	....	2*

**Necessary action was taken to remedy these.*

2. Clean Food Byelaws

The Council adopted the Model Byelaws Series 1, Handling and Wrapping and Delivery of Food and Sale of Food in the Open Air. A copy of these byelaws, along with an explanatory circular, were sent to all food premises.

Inspections were carried out, 77 defects were remedied and advice was given on the correct methods of food hygiene.

3. Ice-cream

The hygiene of premises and personnel was satisfactory. The registrations for the sale only of wrapped ice-cream were markedly increased.

Samples were taken which were graded as follows:—

Grade 1	....	....	....	46
Grade 2	....	....	....	6
Grade 3	....	....	....	8
Grade 4	....	....	....	2

Necessary action was taken to remedy unsatisfactory samples.

4. Meat and Other Foods

The Sanitary Inspectors act as Meat Inspectors.

During the year, 40 visits were made in respect of Meat and Food Inspections.

No Meat Marketing Scheme under Part III of the Public Health (Meat) Regulations, 1924, is in force in this district.

No slaughter houses were used regularly during the year 1950; animals being slaughtered in the adjoining Urban District of Runcorn.

Post-mortem examination of pigs occasionally slaughtered at farms under Ministry of Food Special Licences has been carried out as required.

The quantity of food condemned during the year was:—

			<i>lbs.</i>
Beef—home killed	....	....	578
Beef—imported	....	....	92
Bacon	....	....	7
Fish	....	....	2
Canned meat products	....	....	40
Other canned foods	....	....	193
Fruit	....	....	101
			<hr/>
TOTAL	....	....	1013
			<hr/>

5. Adulteration, etc. Food and Drugs Adulteration Act

I am indebted to the Chief Inspector of the Cheshire County Council for the following report of the work carried out by his department in the Runcorn Rural District under the Food and Drugs Act during the year 1950.

Samples obtained during year ended 31st December, 1950.

<i>Name of Sample</i>	<i>No. obtained</i>	<i>Number adulterated or not up to the recognised standard of quality</i>
Acetic Acid and Caramel	1	—
Boracic Ointment	2	—
Cake	1	—
Custard Pies	1	—
Coffee	3	—
Camphorated Oil	1	—
Cocoa	1	—
Dried Peas	1	1
Doughnuts	1	—
Epsom Salts	1	—

Glycerine	....	....	....	1	—
Ginger Wine	....	....	....	1	—
Honey Mixture	....	....	....	1	—
Indian Brandee	....	....	....	1	—
Ice-cream	....	....	....	5	—
Iodine, Tincture of	....	....	....	1	—
Iced Lollipops	....	....	....	2	—
Inseed and Liquorice Tablets	....	....	....	1	1
Liquid Paraffin	....	....	....	1	—
Lemon Cheese	....	....	....	1	—
Milks	....	....	....	49	4
Mincemeat	....	....	....	1	—
Stomach Powder	....	....	....	1	—
Sausage, beef	....	....	....	1	—
Spice, mixed	....	....	....	1	—
Christmas Pudding	....	....	....	1	1
Zinc Ointment	....	....	....	1	—
				83	7

Particulars of Non-Standard Samples

<i>Sample</i>	<i>Results of Analysis</i>		<i>Remarks</i>
1. Linseed and Liquorice tablets	Deficient in the stated quantity of chloroform.		Seller cautioned.
2. Dried Peas	Packet contained 6.4% of unsound peas deteriorated through attack of weavils, mould, etc.	Attention of packers drawn to the analysis. Packet stated that the peas were "Grown in England and Holland".
3. Milk	2% deficient in non-fatty solids.	Sample was certified to be genuine but abnormal.
4. Milk	1.5% deficient in non-fatty solids.	Sample was certified to be genuine but abnormal.
5. Christmas Pudding	20% deficient in total oils and fats.	Manufacturers cautioned.
6. Milk	1.4% deficient in non-fatty solids.	Sample was certified to be genuine but abnormal.
7. Milk	3.3% deficient in fat	.... No action taken as deficiency was small.

6. Shell-Fish (Molluscan)

There are no Shell-fish beds in the area. Shell-fish are on sale regularly in the district. If Shell-fish, Mussels or Shrimps are eaten locally, they should be well cooked and should come from Government-controlled beds.

7. Watercress

Only that as grown on properly controlled beds with a pure water supply and labelled should be sold and bought, otherwise there is a danger of intestinal disease spreading.

SECTION F

PREVALENCE OF AND CONTROL OVER INFECTIOUS AND OTHER DISEASES

The prevailing varieties of notifiable disease during the year were mainly confined to Measles and Whooping Cough.

1. Research

When further research reveals more about the virus causing e.g., Measles and Whooping Cough, sound curative sera could be made when these diseases could be controlled and eventually wiped out.

Further research is required into the "carrier" state of many diseases with a view to providing a cure for these, but preventive measures, e.g., Diphtheria Immunisation, Smallpox vaccination, inoculation against Typhoid Fever and other diseases will be necessary for many years where these diseases are likely to occur, or are prevalent; in addition proper hygiene and sanitation are an essential.

2. Diphtheria Immunisation

My Council's free scheme was, up to 5th July, 1948, still available so that parents and guardians could have their children properly immunised against the deadly disease diphtheria; after this the free scheme continued under control of the Divisional Health Committee of the Cheshire County Council.

All children one to fifteen years of age, *preferably* between *the sixth and ninth month*, should be properly immunised against Diphtheria by two injections; in addition, a "booster" dose (one) is required in five years' time. This can be obtained *free of cost* through the parents' or guardians' own Doctor in the Surgery; also at Welfare Centres and Day Nurseries. Special Clinics are organised at schools as required. Application should be made at the Welfare Centres, Day Nurseries, Schools, or to the Public Health Department (Divisional).

Propaganda on the above has been continuously carried out aided by the Press and the Central Council for Health Education, but still some children are found to have not been immunised.

Parents or guardians should face up to their responsibilities and have their children properly immunised at once:

“PREVENTION IS BETTER THAN CURE.”

3. Care of the Blind

The welfare of Blind Persons was dealt with by the County Medical Officer of Health, Cheshire, under the provisions of the appropriate Act, working in conjunction with the Blind Welfare Societies, up to 5th July, 1948, and after this the same care continued under Section 28 of the National Health Service Act, 1946 (Divisional Health Committee, etc.).

4. Mental Deficiency and Special Schools for Defective Children

This was dealt with as required by the County Medical Officer of Health, Cheshire, and the appropriate Departments, etc., up to 5th July, 1948; after this further developments were carried out under the appropriate Acts.

5. Ophthalmia Neonatorum

Cases of this disease are notified immediately to the County and local Divisional Medical Officer of Health.

6. Prevention of Disease from Abroad

The Government under the appropriate Acts have a system of medical examination, etc., for those persons arriving in this country from abroad who have been in areas where serious infectious disease has occurred. All contacts are medically examined, given written and verbal instructions what to do if they feel ill, and the local Medical Officer of Health is notified of their arrival and he arranges for the necessary supervision. With the outbreaks of the serious type of smallpox abroad, it is again strongly recommended that all infants and others should be properly vaccinated according to the law on the subject; this can be carried out free of charge through the patient's own doctor.

7. Notifiable Disease (other than Tuberculosis) during the year 1950

The following table includes particulars of the incidence of notifiable diseases in the area during the year 1950:—

<i>Disease</i>	<i>Total Cases Diagnosed</i>	<i>Cases admitted to Hospital</i>	<i>Total Deaths</i>
*Scarlet Fever	64	8	—
Diphtheria	—	—	—
Erysipelas	8	1	—
Pneumonia (Acute Primary or Influenzal)	8	1	—
Measles	499	2	1
Whooping Cough	119	—	—
Ophthalmia Neonatorum	—	—	—
Puerperal Pyrexia	3	—	—
Anterior Poliomyelitis	1	1	—
Acute Encephalitis	1	1	—
Food Poisoning	5	—	—

* N.B. Scarlet fever—Examination of contacts ? carriers (preventive measures and treatment of these):—

1. Attention to unhealthy throat and nose (e.g., operation for removal of unhealthy tonsils and adenoids and/or penicillin treatment).
2. Cleanliness (N.B., dust) in home, school, etc. (Frequent “spring-clean” and disinfection as required—playgrounds, etc. (*non-dusty*).)
3. Constant attention to *good* hygiene and sanitation *everywhere* by all concerned.

An analysis of the total notified cases under the following age groups is given below:—

<i>Disease</i>	<i>Total Cases at all ages</i>	<i>Under 1</i>	<i>1 to 2</i>	<i>2 to 3</i>	<i>3 to 4</i>	<i>4 to 5</i>	<i>5 to 10</i>	<i>10 to 15</i>	<i>15 to 20</i>	<i>20 to 35</i>	<i>35 to 45</i>	<i>45 to 65</i>	<i>65 to over</i>
Scarlet fever	64	—	1	3	4	7	30	8	9	—	2	—	—
Diphtheria	—	—	—	—	—	—	—	—	—	—	—	—	—
Erysipelas	8	—	—	—	—	—	—	—	—	1	1	5	1
Pneumonia (Acute Primary or Influenzal)	8	—	—	—	1	—	—	—	—	1	1	3	2
Measles	499	9	34	47	71	63	262	9	1	2	1	—	—
Whooping cough	119	2	11	24	12	21	48	—	—	1	—	—	—
Ophthalmia neonatorum	—	—	—	—	—	—	—	—	—	—	—	—	—
Anterior polio-myelitis	1	—	—	—	—	—	—	1	—	—	—	—	—
Puerperal pyrexia	3	—	—	—	—	—	—	—	—	3	—	—	—
Acute encephalitis	1	—	—	—	1	—	—	—	—	—	—	—	—
Food poisoning	5	—	1	1	—	—	—	—	—	1	2	—	—
TOTALS	708	11	47	75	89	91	340	18	10	9	5	10	3

The Chester and District Hospital Management Committee have informed all general practitioners that they would be responsible for the supply of diphtheria antitoxin (free)—in emergency at the Runcorn Victoria Memorial Hospital (the Matron). In addition it can be obtained at any general hospital. Supplies can also be obtained (in emergency) from any infectious disease hospital, e.g., Warrington and Davenham.

Practitioners may, if they wish, obtain a small stock from a hospital in anticipation of requirements rather than wait until they need it for a particular case.

Stock held by hospitals or practitioners should be returned three months before expiry date for exchange to the source of supply.

In few diseases is prompt treatment as necessary as in diphtheria.

N.B. Antitoxin should be given in all suspicious cases at once, in the home or in the hospital. SWABBING IS ONLY AN AID TO DIAGNOSIS.

This matter is particularly important as the percentage of children properly immunised against diphtheria has fallen during the last year.

Swabs were examined at the Public Health Laboratory, Birkenhead—in addition, as required, the laboratories at Chester and Warrington, free of charge (*this applies to all examinations carried out in the interests of Public Health*).

RUNCORN RURAL DISTRICT

8. Total Deaths, 1950

<i>Cause of Death</i>	<i>Males</i>	<i>Females</i>
All Causes	200	181
1. Tuberculosis, respiratory	3	1
2. Tuberculosis, other	1	1
3. Syphilitic disease	1	0
4. Diphtheria	0	0
5. Whooping Cough	0	0
6. Meningococcal infections	0	0
7. Acute Poliomyelitis	0	0
8. Measles	0	1
9. Other infective and parasitic diseases	1	0
10. Malignant Neoplasm, stomach	7	1
11. Malignant Neoplasm, lung, bronchus	7	2
12. Malignant Neoplasm, breast	0	7
13. Malignant Neoplasm, uterus	0	3
14. Other malignant and lymphatic Neoplasms	19	14
15. Leukaemia, aleukaemia	0	1
16. Diabetes	1	2
17. Vascular lesions of nervous system	20	26
18. Coronary disease, angina	40	26
19. Hypertension with heart disease	5	6
20. Other heart disease	34	39
21. Other circulatory disease	17	13
22. Influenza	2	0
23. Pneumonia (broncho)	3	3
24. Bronchitis	10	8
25. Other diseases of respiratory system	3	2
26. Ulcer of stomach and duodenum	1	0
27. Gastritis, enteritis and diarrhoea	1	1
28. Nephritis and nephrosis	0	3
29. Hyperplasia of prostate	3	0
30. Pregnancy, childbirth, abortion	0	0
31. Congenital malformations	0	2
32. Other defined and ill-defined diseases	17	15
33. Motor vehicle accidents	2	1
34. All other accidents	1	3
35. Suicide	1	0
36. Homicide and operations of war	0	0

					Males	Females
Deaths of Infants under 1 year	{	Total	....	....	6	4
		Legitimate	....	....	5	4
		Illegitimate	....	....	1	—
Live Births	{	Total	....	....	253	242
		Legitimate	....	....	245	231
		Illegitimate	....	....	8	11
Stillbirths	{	Total	....	....	3	4
		Legitimate	....	....	2	4
		Illegitimate	....	....	1	—

POPULATION.....35,580 (estimated mid-year Home Population)

Comparability Factors.....Births 1.03; Deaths 0.95

BIRTH RATES, DEATH RATES, ANALYSIS OF MORTALITY, MATERNAL MORTALITY AND CASE RATES FOR CERTAIN INFECTIOUS DISEASES IN THE YEAR 1950

Provisional figures based on Quarterly Returns

	Runcorn Rural District	England and Wales	126 County Boroughs and Great Towns (including London)	148 Smaller Towns (Resident Population 25,000 to 50,000 at 1931 Census)	London Adminis- trative County
<i>Rates per 1,000 civilian population</i>					
BIRTHS—					
Live births	13.91	15.8	17.6	16.7	17.8
Still births	0.20	0.37	0.45	0.38	0.36
DEATHS—					
All causes	10.72	11.6	12.3	11.6	11.8
Typhoid and Paratyphoid	0.00	0.00	0.00	0.00	0.00
Whooping Cough	0.00	0.01	0.01	0.01	0.01
Diphtheria	0.00	0.00	0.00	0.00	0.00
Tuberculosis	0.17	0.36	0.42	0.33	0.39
Influenza	0.05	0.10	0.09	0.10	0.07
Smallpox	0.00	0.00	0.00	0.00	0.00
Acute Poliomyelitis (includ- ing Polioencephalitis)	0.00	0.02	0.02	0.02	0.01
Pneumonia	0.17	0.46	0.49	0.45	0.48
NOTIFICATIONS (corrected)					
Typhoid Fever	0.00	0.00	0.00	0.00	0.01
Paratyphoid Fever	0.00	0.01	0.01	0.01	0.01
Meningococcal Infection	0.00	0.03	0.03	0.02	0.03
Scarlet Fever	1.79	1.50	1.56	1.61	1.23
Whooping Cough	3.34	3.60	3.97	3.15	3.21
Diphtheria	0.00	0.02	0.03	0.02	0.03
Erysipelas	0.22	0.17	0.19	0.16	0.17
Smallpox	0.00	0.00	0.00	—	—
Measles	14.02	8.39	8.76	8.36	6.57
Pneumonia	0.22	0.70	0.77	0.61	0.50
Acute Poliomyelitis (includ- ing Polioencephalitis):					
Paralytic	0.02	0.13	0.12	0.11	0.08
Non-paralytic	0.00	0.05	0.05	0.06	0.05
Food Poisoning	0.14	0.17	0.16	0.14	0.25
<i>Rates per 1,000 Live Births</i>					
DEATHS—					
All causes under 1 year of age	20.20	29.8 (a)	33.8	29.4	26.3
Enteritis and diarrhoea under 2 years of age	2.02	1.9	2.2	1.6	1.0
NOTIFICATIONS (corrected)					
Puerperal Fever and Pyrexia	5.97	5.81	7.43	4.33	6.03

(a) Per 1,000 related live births.

MATERNAL MORTALITY IN ENGLAND AND WALES

<i>International List No. and Cause</i>	<i>Rates per 1,000 Total (Live and Still) Births</i>	<i>Rates per million women aged 15-44</i>
651. Abortion with sepsis	0.09	7
650, 652. Other abortion	0.05	4
640-649, 670-678. Complication of pregnancy and delivery	0.54	
681. Sepsis of childbirth and the puerperium	0.03	
680, 682-689. Other complications of the puerperium	0.15	

9. Tuberculosis

No person employed in the milk trade was found suffering from Pulmonary Tuberculosis, nor was it found necessary compulsorily to remove to hospital any person suffering from Tuberculosis.

For the prevention of this disease, the following precautions should be noted:—

A properly balanced diet, in addition, early diagnosis (X-ray, etc.), proper treatment, *thorough* disinfection of homes when cases go to a sanatorium, separate rooms and utensils, frequent visits by Health Visitors, and as required by the Medical Officer of Health and Sanitary Inspectors. All new cases are specially investigated by me and reported to me as Divisional Medical Officer of Health (as required to H.M. Inspector of Factories). Close liaison is kept with the chest physician. Follow-up of contacts and the patients by the Health Visitor is carried out very thoroughly and action taken as required by myself and the Chest Physician (Divisional Health).

Medical officers in charge of industrial hygiene, etc., factory inspectors, form a valuable liaison in preventing and ascertaining the cause of tuberculosis (e.g., dust, working conditions, disinfections, cleanliness, etc.). The Public Health Act, 1936 (section 287) proves useful to the Medical Officer of Health (and Sanitary Inspectors) allowing power of entry to any premises for the general purpose of the Act, in conjunction with those concerned.

In my opinion, all milk, especially for children, should be properly heat-treated (e.g., pasteurised or sterilized), failing this, heat-treated in the home.

With proper veterinary control of cattle, proper housing conditions and food for the people, these, with heat-treatment of milk (e.g., pasteurisation, etc., or proper heat-treatment in the home), will help to stamp out this terrible disease. Proper heat-treatment of milk not only kills tubercle bacillus but other germs causing disease.

A thorough disinfection (steam, etc.) of the house, clothing, etc., with a *thorough* "spring-clean" of the house when a case is admitted to a sanatorium or hospital, *is essential*. Isolation of contacts (*especially* children) is most essential and every endeavour is made to do this. B.C.G. injections are given by the chest physician in suitable cases. Chalets, extra beds and bedding are supplied as and when required.

Particulars of the 36 new cases of tuberculosis and of the 6 deaths from the disease in the area during 1950:—

Age Periods	New Cases				Deaths			
	Respiratory		Non-Respiratory		Respiratory		Non-Respiratory	
	M.	F.	M.	F.	M.	F.	M.	F.
0-1	—	—	—	—	—	—	—	—
1-4	—	1	1	1	—	—	1	—
4-14	—	1	—	1	—	—	—	—
15-24	2	4	—	1	—	—	—	—
25-34	7 (4)	3 (1)	—	1	—	—	—	—
35-44	3 (2)	2 (1)	—	—	—	—	—	—
45-54	1	2 (1)	—	—	2	—	—	—
55-64	2	1	—	—	—	—	—	—
65 upwards	1	1	—	—	1	1	—	1
TOTALS	16	15	1	4	3	1	1	1

4 Deaths were Notified Cases.

Figures in brackets relate to cases transferred from another district

Specimens of sputum from suspected Pulmonary Tuberculosis patients are examined at the Public Health Laboratory, Birkenhead, also Warrington and Chester Royal Infirmary laboratories.

Tuberculosis cases on register. Comparative rates:—

Year	Estimated Population	Pulmonary		Non-Pulmonary		Total all Forms	No. per 1,000 of Population
		M.	F.	M.	F.		
1942	—	67	47	31	43	188	
1943	—	66	49	31	42	188	
1944	—	65	53	37	47	202	
1945	31,710	71	53	32	41	197	6.21
1946	32,760	68	44	34	34	180	5.49
1947	32,930	60	42	29	32	163	4.95
1948	34,230	59	44	28	33	164	4.79
1949	34,550	62	37	31	34	164	4.74
1950	35,580	74	48	29	35	186	5.22

10. Classified Table of Cancer Deaths

	AGE	-30		30-50		50-70		over		Total
		M.	F.	M.	F.	M.	F.	M.	F.	
Bladder		-	-	-	-	1	-	-	-	1
Breast		-	-	-	2	-	3	-	2	7
Genital Organs:										
Prostate		-	-	-	-	2	-	1	-	3
Uterus		-	-	-	-	-	3	-	-	3
Liver		1	-	-	-	1	-	1	-	3
Kidney		-	-	-	-	-	-	1	-	1
Lungs		-	-	1	-	5	1	1	1	9
Neck		-	-	-	-	-	-	-	-	-
Rectum		-	-	-	-	1	2	1	-	4
Remainder of Intestinal Tract:										
Oesophagus		-	-	-	-	-	-	-	-	-
Colon		-	-	-	-	-	3	2	2	7
Stomach		-	-	-	-	5	-	2	1	8
Throat and Mouth		-	-	-	-	-	1	1	-	2
Cancer of all other sites....		-	-	-	-	2	3	4	3	12
Male Deaths		1	-	1	-	17	-	14	-	33
Female Deaths		-	-	-	2	-	16	-	9	27

The 60 deaths from cancer give a rate of 1.68 per 1,000 of population, or 15.7% of total number (381) deaths reported during year.

11. Cancer

Under Section 76 of the National Health Service Act, 1946, Sections 1, 2 and 6 and sub-sections (2) and (3) of Section 8 of the Cancer Act, 1939, were repealed and the responsibility for the provision of an adequate cancer service was placed on the Minister and Regional Hospital Boards by Part II of the National Health Service Act of 1946.

Facilities for cancer diagnosis and treatment are available in all major general hospitals in the area and the radiotherapeutic work of the region is centred at the Liverpool Radium Institute. Follow-up clinics are undertaken at the Chester Royal Infirmary.

The area of the Runcorn Rural District Council and the Runcorn Urban District Council are within the area of the Liverpool Regional Hospital Board.

ANNUAL REPORT OF CANAL BOAT INSPECTOR

In accordance with Section 249(3) of the Public Health Act, 1936, I beg to report as follows:—

No canal boats were inspected during the year.

No notifications of infectious diseases in canal boats were received.

Several visits were made to the Stockton Heath, Preston Brook and Norton quays but no boats tied up there.

Canal transport to the usual warehouses has during this year been superseded by road transport.

IMPORTANT

THE COMMON SENSE PREVENTIVE MEASURES AGAINST DISEASE

- (1) **CLEANLINESS.** (a) This **must** be thorough in or around the house, kitchen, shop, larder, etc. (This also applies to feeding bottles and teats.)

WHY? Where these are **absolutely** clean there are few, if any, disease germs. Feeding bottles and teats **must** be thoroughly washed and boiled prior to use. If in doubt ask your Public Health Department, Welfare Centre, Health Visitor, or District Nurse.

(b) This also applies to those who handle and cook food, especially the hands and nails.

WHY? Dirt (with disease germs) may be on the hands or **under the nails** and so spread disease germs to food; **always** thoroughly wash the hands and **clean under the nails** after using the lavatory.

- (2) **DESTRUCTION OF FLIES, RATS AND MICE.**

(a) **FLIES:** Any dirt, faeces, manure, etc., **in which flies breed** must be disposed of quickly and thoroughly (burying and **well covering** these with earth is one of the best ways). Flies should be destroyed by, e.g., fly sprays, fly swats, fly papers, etc., and food larders, pail closets, and bins **must** be fly proof. Food **must** be protected from dust, dirt, flies, rats and mice, and kept in a cool well ventilated place. Disinfectant solution **must** be used to **cover** contents in pail closets.

WHY? Flies **carry** disease germs (in and on their bodies) from all kinds of dirt to food, and so spread diseases.

(b) **RATS AND MICE:** For the destruction of these ask your chemist; failing this your Sanitary Inspector (who is also the Rodent Officer).

WHY? Rats and mice breed in all kinds of dirt, and like flies carry disease germs to food (and water).

- (3) **FOOD** should be **properly** heat treated; this applies especially to the manufacture of ice cream, the cooking of shell-fish, and the pasteurisation and sterilization of milk. Where milk is not pasteurised or sterilized I recommend that this is boiled at home.

WHY? By proper heat treatment, any disease germs present are destroyed. This applies to all kinds of food, including ice cream, shell-fish and milk.

- (4) **WATERCRESS** must be obtained from properly controlled beds, that is, where pure water is supplied; **this with lettuce and fruits** without a fairly thick outside coat, should be thoroughly washed in a weak Condyl's solution and then rinsed with pure water before being eaten.

WHY? Watercress can carry disease germs on it; this also applies to lettuce and fruit.

- (5) **DRIED EGGS AND DRIED MILK** must be kept in a cool place, and when the package is opened it should be used up quickly.
WHY? These are good foods, but if the containers are left open to the air too long (e.g., over two days) germs can grow in them and so spread disease.
- (6) **ALL WATER FOR DRINKING, DIETETIC OR DAIRY PURPOSES** should be from a pure supply; if in doubt as to its purity, boil it well for small quantities, or chlorinate it for large quantities—see instructions on bottles obtainable from most chemists. **Do not bathe in rivers, etc.**, which may be sewage polluted.
WHY? Water, if impure, can have disease germs in it; boiling or chlorination kills disease germs. If you bathe in rivers, canals, etc., which may be sewage polluted, you may swallow disease germs.
- (7) **CONSTIPATION.** This *must* be avoided, for example, by eating sufficient roughage food, e.g., whole-meal bread and vegetables also by keeping the stomach muscles strong and healthy by games and P.T. exercises. If in doubt see your own doctor.
WHY? If constipated foul matter remains too long in the lower bowel so poisoning the blood and also holding disease germs in the bowel which may infect the body. Many diseases might be traced to chronic constipation.
- (8) **TO AVOID SPREADING “COLDS IN THE HEAD”, INFLUENZA, etc.** Use a handkerchief when you cough or sneeze.
WHY? A handkerchief acts as a screen and so catches disease germs from the nose and throat. Disinfect and boil handkerchiefs well prior to washing. Wet feet, wet clothes, and draughts cause chilling of the body and so render it more liable to disease.
- (9) **PROTECTIVE INJECTIONS AGAINST DIPHTHERIA, SMALL-POX, etc.** See that all (especially young children) have these as required.
WHY? By these injections the body is more fully protected against dangerous diseases. If in doubt ask your own doctor, Medical Officer of Health, Welfare Centre, Health Visitor, or District Nurse.
- (10) **PROPER DISINFECTION OF HOUSES, etc.** After any serious disease in a house, etc., see that this is carried out (ask your Public Health Department, Sanitary Inspector), **also a thorough “spring-clean”**. The latter would be sufficient in less serious diseases such as influenza, measles and whooping cough.
WHY? By this disease germs are destroyed or washed away and so cannot infect others.
- (11) **ISOLATION OF CONTACTS OF INFECTIOUS DISEASE.** Carry out thoroughly what is recommended on the special pamphlet issued by the Medical Officer of Health when patients are sent to hospital or nursed at home.
WHY? By so doing disease germs are less likely to spread. If in doubt ask your own doctor or Public Health Department (e.g., your Sanitary Inspector).
- (12) **DEFECTIVE TEETH.** See your dentist if your teeth are bad or septic; better still see him as a routine every six months.
WHY? If your teeth are bad or septic the chewing powers are not good and so all kinds of indigestion may arise. Septic teeth (and gums) lead to poisoning of the blood and so to various diseases.

(13) THE PREVENTIVE FOODS. Eat some of these daily in your daily diet, which must be properly cooked, varied, and flavoured.

WHY? The preventive foods (i.e., those which help the body to prevent disease) are:—

Milk and eggs (dried or ordinary);

Cheese;

Fresh vegetables and fruit (cooked or in salads);

Animal fats, e.g., fish (especially herrings), and butter;

Margarine (vitaminised).

These all contain valuable substances called **vitamins** which are **essential** to good health. If in doubt ask, e.g., your Health Visitor or School Teacher, failing this your doctor.

When the above cannot be obtained, various additional vitamins, e.g., rose hip juice (vitamin C), vitamin C tablets, wheatgerm (vitamin B), cod and halibut liver oil (vitamins A and D), and other vitamins can be obtained from your own doctor if he agrees these are required. They can also be bought at the various chemists and shops. Without the proper amount of vitamins taken daily, the body is more open to attack by disease germs.

GENERAL

- (1) Anyone feeling ill should see their own doctor (better still, as a routine, see him once a year)—though with the above common-sense precautions there should be little danger of contacting or spreading disease.
- (2) ASK FOR MORE OF THESE PAMPHLETS AS REQUIRED FROM YOUR MEDICAL OFFICER OF HEALTH. Have discussion groups, lectures and films on health education. Attend the official classes on personal hygiene given by, e.g., the Red Cross Society, St. John Association, Scouts and Girl Guides—these organisations have excellent little books on the subject. Always carry out these common-sense preventive measures and *tell others about them*.
- (3) Good health mostly depends on YOU—your co-operation is essential.

“WHERE THERE IS DIRT THERE IS DISEASE”

E. N. HILLMAN GRAY, L.R.C.P.&S., L.M., D.P.H.

Medical Officer of Health, Runcorn Urban & Rural Districts.
Divisional Medical Officer and School Medical Officer.

PUBLIC HEALTH DEPARTMENTS:

1. Town Hall, Runcorn.
2. Castle Park, Frodsham.

N.B. PLEASE KEEP THIS PAMPHLET FOR EASY REFERENCE

CHESHIRE COUNTY COUNCIL

RUNCORN DIVISIONAL HEALTH COMMITTEE

REPORT
FOR THE YEAR
1950

By the

DIVISIONAL MEDICAL OFFICER OF HEALTH

Presented to the
Runcorn Divisional Health Committee
20th March, 1951

MEMBERS OF THE RUNCORN DIVISIONAL HEALTH COMMITTEE

Chairman:
COUNCILLOR C. EVANS

Vice-Chairman:
COUNCILLOR J. HUNT

Representatives of Local Health Authority

Alderman G. ASTBURY, J.P. (Chairman, County Health Committee)
„ Dr. W. N. LEAK (Vice-Chairman, County Health Committee)
„ W. A. GIBSON, J.P.
„ W. GITTINS, J.P.
Councillor H. HUGHES, C.C.
„ A. E. MOORS, C.C.
„ J. D. WHITLEY, C.C.

Runcorn Rural District Council Representatives

Councillor Mrs. E. STANSFIELD, J.P.	Councillor E. G. WHITE
„ C. WILKINSON	„ G. S. WALLWORTH, J.P.
„ J. A. HUTCHINSON	„ G. WILLIAMS
„ H. JACKSON	„ W. S. LOOKER

Runcorn Urban District Council Representatives

Councillor T. B. SHALLCROSS	Councillor C. C. POSNETT, C.C.
„ E. C. BROOKER, J.P.	„ T. WHITBY, J.P.
„ H. GOODALL, J.P.	„ A. WOOD

Co-opted Members

Mr. W. H. STUBBS, Chester and District Hospital Management Committee
Mr. A. JONES, Runcorn Divisional Executive for Education
Dr. C. E. W. BOWER, Local Medical Committee for the County Palatine of Chester
Dr. E. WARDLE, National Health Service, Local Dental Committee
Mrs. W. HILL, Cheshire County Nursing Association
Mrs. N. EVANS
Mr. E. EARLAM
Mr. W. RICHARDSON

Officers

Clerk to the Committee: Mr. T. J. LEWIS
Divisional Medical Officer: E. N. HILLMAN GRAY, L.R.C.P.&S., L.M., D.P.H.

CHESHIRE COUNTY COUNCIL
RUNCORN DIVISIONAL HEALTH COMMITTEE

ANNUAL REPORT OF THE
DIVISIONAL MEDICAL OFFICER OF HEALTH
FOR THE YEAR 1950

INTRODUCTION

TO THE CHAIRMAN AND MEMBERS OF THE
RUNCORN DIVISIONAL HEALTH COMMITTEE

Mr. Chairman, Ladies and Gentlemen,

I have the honour to present this my second Annual Report dealing with those portions of the Sections of Part III of the National Health Act, 1946, for which this Committee is responsible.

The report is sub-divided into the various sections of the Act and gives details of the work carried out during the year.

Child Welfare.—In connection with child welfare, in addition to the official welfare centres, day nursery, etc., available for all concerned, there are many representative voluntary organisations concerned with this very important subject—for further information enquiries should be made at the Divisional Health Department.

Family Planning Association (for marriage guidance, etc.—strongly recommended).—Some of the voluntary clinics in the north are, e.g.:—

†LIVERPOOL MOTHERS' WELFARE CLINIC, 9 Gambier Terrace, Liverpool, 1.—Wednesdays, Thursdays and Fridays, 2 to 3 p.m.

BRANCH CLINICS:—

*†Liverpool, 4.—294 Netherfield Road. Thursdays, 10.30 to 11.30 a.m.

*†Liverpool, 11.—Community Council Hall, Townsend Avenue. Monday, 2 to 3 p.m.

*†Liverpool, 21.—Linacre Methodist Mission, Linacre Road, Litherland. Fridays, 2 to 3 p.m.

At clinics marked * every patient is seen by a doctor.

At clinics marked † pre-marriage advice is given.

Smallpox.—Owing to the danger of serious cases of smallpox arriving in this country from abroad, all concerned are advised they should be vaccinated.

Immunisation.—*Diphtheria immunisation* proves again and again everywhere in the world its wonderful powers to prevent this deadly disease; *all children*, preferably between the sixth and ninth month, must be properly immunised, with a further dose in just under five years' time; this can be obtained free of cost under the Divisional Health Committee Scheme from their own doctors or at the welfare centre, day nursery or school.

PREVENTION IS BETTER THAN CURE.

From the number of notifications received during the year for children who had been vaccinated against smallpox and immunised against diphtheria, it would appear that there has been a distinct fall in the percentage of children so protected. Remarks on this serious aspect of preventive medicine are made later in my report.

Every endeavour will be made to ensure that the high percentage of children vaccinated and immunised in the past is maintained in future years.

Ambulance and Transport Service

The temporary ambulance and transport service has continued during the year, and for a temporary service this has worked fairly satisfactorily, but it is sincerely hoped that at an early date a permanent service will be established for the Division.

Prevention of Illness, Care and After-care

In connection with the prevention of illness, care and after-care, much work has been carried out during the year, especially with tuberculosis patients. All cases on the registers have been visited by the health visitors, and up-to-date report sheets completed. The care and after-care of these patients, and also other cases of illness, will be further pursued.

Accidents.—Insufficient attention is given to the prevention of accidents, especially in young persons, which could be avoided by common-sense methods; voluntary societies and school authorities can help in this important matter with suitable lectures and discussion groups at frequent intervals. The Citizens' Advice Bureaux (Chester and Warrington) can advise where specialist lectures can be obtained.

Research.—Further medical and veterinary research (in addition, research on the virus diseases in plants, animals, etc.) may solve the question of the cause and spread of the diseases caused by viruses; especially the serious disease anterior poliomyelitis (infantile paralysis).

Intensive research is being carried out by the Ministry of Health to ascertain whether german measles (rubella) occurring in pregnant women may cause malformations, etc., in the new-born. (It is interesting to note that most tropical diseases have a cure, *due mostly to intensive research*, i.e., find the cause.) Research *must* proceed “behind the scenes” so that the cause and eventually the prevention and cure of all diseases will result. Further facilities in the investigation of infectious disease and disease generally is recommended, e.g., by pathological *overhauls*. A *FULL* examination of the blood is “a mirror of the health” of the individual and is insisted on by, e.g., some insurance companies in the United States.

Health Education

A pamphlet on the “*Commonsense Preventive Measures Against Disease*” is issued as required to all concerned via voluntary societies, health visitors, district nurses, midwives, and sanitary inspectors; it has proved most useful and instructive, especially where discussion groups, lectures, etc., have been arranged on the subject. (See Appendices to Annual Reports Runcorn Urban District Council and Runcorn Rural District Council, 1950.)

Hostel Accommodation (e.g., for elderly persons who can look after themselves) and **Convalescent Treatment** (N.B., children), can be arranged for through the Divisional Medical Officer of Health where beds are available and parents or guardians are prepared to pay a weekly amount based on an official “means test”.

A close liaison has been kept with doctors, consultant chest physicians, health visitors and district nurses in the day-to-day administration of the various sections of the Act, and I am most grateful for the help they have afforded me at all times.

Domestic Help Service

The Domestic Help Service is being used more and more each year, especially in cases of old people living on their own where they are unable to keep their homes clean. In each case an enquiry is made as to whether relations can help, or someone could be asked to live in, so helping the housing shortage, and only where a help is essential is this optional service granted, and then only on a “means test”.

My thanks are due to the Chairman and Members of the Divisional Health Committee for their support and help to me on all occasions.

The co-operation and assistance of the County Medical Officer and his staff, the Clerk to the Divisional Health Committee, and also

the staff of my Divisional Health Office, has been greatly appreciated by me in the carrying out of my various duties.

I beg to remain,

Your obedient Servant,

E. N. HILLMAN GRAY.

28th February, 1951.

SECTION 22

CARE OF MOTHERS AND YOUNG CHILDREN

There are six Welfare Centres in the Division, situated as follows:—

Village Hall, Antrobus;
Trinity Church House, The Rock, Frodsham;
Methodist Sunday School, Grappenhall;
Cable Works Recreation Room, Helsby;
29 High Street, Runcorn;
65 Whitefield Road, Stockton Heath.

It is proposed to open a Welfare Centre at Kingsley in the near future to cover the parish of Kingsley and the surrounding district.

There is one day nursery in the Division, situated in Okell Street, Runcorn.

Attendances at the various clinics held at the Welfare Centres and the day nursery are given in the tables at the end of this section.

Periodic visits were made to the Welfare Centres and the day nursery and action taken regarding any matters requiring attention.

Work has not yet commenced on the conversion of the two houses "Aulderwood" and "Rydal Mount", Halton Road, Runcorn, to an all-purposes Welfare Centre for Runcorn. It is hoped that this work will be allowed to proceed at an early date.

Attendances at welfare centres and day nursery

The following are the yearly figures of attendances at the clinics and day nursery:—

A. MOTHERS' CLINIC					<i>New Cases</i>	<i>Total Attendances</i>
Ante-natal	....	....	....	....	270	952
Post-natal	....	....	....	....	32	41
Dental:—						
Pre-natal	....	....	....	....	13	22
Nursing mothers	....	....	....	....	4	19
Dentures supplied	....	....	....	....		8

B. YOUNG CHILDREN'S CLINICS

				New Cases	Total Attendances
(i) <i>Infant welfare</i>					
To 1 year	....	....	....	565	6548
1 to 5 years	....	....	....	58	2416
(ii) <i>Specialist</i>					
Ophthalmic	....	....	....	20	124
Dental treatment (under 5)				63	64
E.N.T. (under 5)	....	....	....	3	3

B. (i) Welfare Centres

				New Cases		Total Attendances	
				0-1	1-5	0-1	1-5
Antrobus	....	....	....	14	3	116	173
Frodsham	....	....	....	68	11	527	375
Grappenhall	....	....	....	105	9	1298	505
Helsby	....	....	....	45	3	716	302
Runcorn	....	....	....	227	18	2455	767
Stockton Heath	....	....	....	106	14	1436	294
Totals	....	....	....	565	58	6548	2416

B. 1 (ii) Ophthalmic Clinics

				New Cases		Total Attendances
Frodsham	....	....	....	4	....	20
Runcorn	....	....	....	9	....	74
Stockton Heath	....	....	....	7	....	30
Totals	....	....	....	20	....	124

E.N.T. Clinic

				New Cases		Total Attendance
Frodsham	....	....	....	—	....	—
Stockton Heath	....	....	....	3	....	3
Totals	....	....	....	3	....	3

(iii) Day Nursery, Runcorn

				Average No. Attending	Total Attendances
Age 0-2 years	....	....	....	9	2304
2-5 years	....	....	....	24	6175

The day nursery, Runcorn, is staffed by a matron, sister, three full-time nursery assistants, two part-time nursery assistants, two student nursery assistants, two domestic staff and one handy-man and is well attended. It supplies an excellent service for, e.g., mothers who are working.

SECTION 23 — MIDWIFERY

Under this section the Committee are responsible for:—

- (i) Provision, where necessary, of accommodation for midwives and the maintenance, repair and alterations required for such premises.
- (ii) Provision of transport for midwives when necessary in cases of emergency.

In 1949, No. 10 Stanley Villas, Runcorn, was converted into two flats and accommodation provided for a midwife and health visitor. This is the only property in the Division, occupied by a county midwife, for which this Committee is responsible.

During the year an inspection of the premises was made by the General Purposes Sub-Committee, and any repairs requiring attention were dealt with.

Transport and medical requisites have been provided as required.

SECTION 24— HEALTH VISITING

The Committee are also responsible for housing accommodation for health visitors, but with the exception of the health visitor residing in the flat at No. 10 Stanley Villas, Runcorn, all other health visitors in the Division reside in property under arrangements made by themselves and for which this Committee have no responsibility with regard to repairs, etc.

SECTION 25 — HOME NURSING

All district nurses, with the exception of the nurse for Stockton Heath, reside in county-owned or rented property.

The Stockton Heath district nurse is living in rooms and numerous enquiries were made with a view to finding suitable accommodation, but without success.

The plot of land which the Committee recommended in 1949 should be acquired for the erection thereon of a detached house was not available for building purposes, and during the year an alternative site in Fairfield Gardens, Stockton Heath, was inspected by the General Purposes Sub-Committee, and recommended to the County Council the acquisition thereof for erection thereon of a house for the district nurse.

It is hoped that the purchase of this land will be completed at an early date, and a commencement made on the building of the house.

All other properties occupied by district nurses were inspected by the Sub-Committee during the year, and any urgent matters requiring immediate attention were dealt with. Major alterations and repairs were referred to the County Architect for tenders to be obtained and to be dealt with as soon as possible.

SECTION 26 — VACCINATION AND IMMUNISATION

The percentage of children under 5 years immunised against diphtheria in the Division has fallen to a dangerously low level during the year—52%—and every effort is being made to ensure that as many children as possible are protected against this disease which can cause death or serious after-effects, e.g., heart trouble, etc.

The percentage of children under 1 year vaccinated against smallpox in the Division is 32%.

A register is maintained of all births in the Division and if no record is received that a child has been vaccinated at the age of 6 months, a letter is sent to the parents strongly advising them to have their child vaccinated. A similar course is also taken regarding immunisation when the child is one year of age, in the case of those in whom immunity has not been carried out at 6-9 months.

Immunisation against whooping cough is also available under the Cheshire County Council Scheme.

Health visitors also advise mothers to have their children vaccinated and immunised.

Through posters, pamphlets, Central Office of Information films, the B.B.C. and the Press, all concerned, especially parents and guardians, have been reminded of their duty as regards this important matter.

A special immunisation session is held at the Welfare Centre, Runcorn, at 2.30 p.m. on the first Thursday of each month. As soon as possible clinics will be held in schools, if sufficient names are forthcoming.

The number of vaccinations and immunisations carried out during the year is as follows:—

Vaccination

	<i>At Clinics</i>	<i>Doctor's Surgery</i>	<i>Patient's Home</i>	<i>Total</i>
Primary	68	356	69	493
Re-vaccination	4	101	10	115

Immunisation—Primary

<i>Type</i>	<i>At Clinics</i>	<i>Doctor's Surgery</i>	<i>Patient's Home</i>	<i>Total</i>
Diphtheria	120	174	24	318
Whooping cough	2	—	—	2
Combined whooping cough and diphtheria	73	186	10	269

Immunisation—Reinforcing injection

Diphtheria	....	....	....	—	67	3	70
Whooping cough		....	....	—	—	—	—
Combined whooping cough and diphtheria	....	....	....	—	1	—	1

SECTION 27 — AMBULANCE AND TRANSPORT SERVICE

The scheme in force in the Division for this service is a temporary one, arrangements having been made with private firms throughout the Division to supply ambulances and cars to convey patients to hospitals, etc.

A permanent service for this Division is required at an early date.

The arrangements made with the Chester and District Hospital Management Committee for the part-time services of Mr. Price to drive ambulance FLG 492, owned by the Cheshire County Council terminated on the 31st March, 1950. Authority was obtained for the garaging of this vehicle at the Recovery Hospital, Dutton, and arrangements made with Messrs. Hazlehurst Bros. for driving and maintenance.

The arrangements between the County Council and the Warrington Corporation whereby the latter supplied ambulances for the conveyance of patients from Stockton Heath and the surrounding district was continued throughout the year.

Arrangements were also made with the Warrington Corporation for the conveyance of infectious disease cases.

Where it is necessary for a patient to travel a considerable distance outside the County, whenever possible arrangements are made with the Railway Executive for a special compartment to be reserved on the train and an ambulance provided to convey the patient from his/her home to the nearest railway station on a direct line. Arrangements are also made with the distant authority for an ambulance to meet the train on arrival to convey the patient to his/her destination.

This mode of travel is usually found to be more comfortable and quicker than the patient making the journey all the way by road, and is also cheaper.

During the year three patients were conveyed to Glasgow, Felixstowe and Bath under the above arrangements.

During the year the Cheshire County Council recommended that the Clifton Garage, Runcorn, be obtained by compulsory purchase for the purpose of establishing a permanent ambulance service for the Division. After a public enquiry this was not agreed to by the Minister of Health.

Further action is being taken to obtain a suitable site for building. Details of journeys made during the year are as follows:—

(1)			(2)	(3)	(4)	(5)	(6)
			<i>No. of Vehicles 31.12.50</i>	<i>Total No. Journeys 1950</i>	<i>Total No. Patients Carried 1950</i>	<i>No. of Accident and Emergency calls included in Column 3 1950</i>	<i>Total Mileage 1950</i>
A.	DIRECTLY PROVIDED SERVICE	Ambulance	1	86(-)*	103(-)*	52 (-)*	2510(-)*
		Cars	—	— (-)*	— (-)*	— (-)*	— (-)*
B.	AGENCY SERVICE (Red Cross, works regular contract firms)	Ambulance	5	749	800	610	25034
		Cars	6	2811	3838	622	78864
C.	SUPPLEMEN- TARY SERVICE (Hospital car service, Taxi firms cars)	Ambulance	—	—	—	—	—
			—	1786	2070	258	45305
D. Number of drivers available 31.12.50 for voluntary Car Services included in C above—NIL.							

* Figures in brackets specify the number, NOT included in the figure preceding the brackets, attributable to those persons picked up outside *or inside* the administrative county, who are chargeable to other local health authorities.

SECTION 28

PREVENTION OF ILLNESS, CARE AND AFTER-CARE

Tuberculosis

During 1950, as agreed to by the chest physicians, all cases appearing on the register have again been visited by the health visitors, and report sheets completed.

The health visitors are informed of all new cases and are asked to visit and complete the environmental report sheet, and where the contacts of the patients have not attended the dispensary for examination, they are advised to do so. A copy of the report sheet is forwarded by me to the consultant chest physician, together with my observations on the case.

Visits are made to homes by me as and when required, also by the chest physician.

When a patient is admitted to hospital, arrangements are made for a full disinfection of the premises to be carried out.

All patients are advised to occupy a separate bedroom, or where this is not possible, a separate bed. Where the housing conditions of the patient are bad, or overcrowded, these cases are given my careful consideration, and in my capacity as Medical Officer of Health to the Local District Councils, I recommend extra points be allocated for rehousing.

I am pleased to be able to report that both the Urban and Rural District Councils have given their sympathetic consideration to the rehousing of these cases. From the 5th July, 1948, to 31st December, 1950, 34 cases have been rehoused.

During the year the issue of a garden chalet was recommended for a patient living in the rural area of the Division.

Details of cases since the 5th July, 1948, to 31st December, 1950, are as follows:—

	<i>Pulmonary</i>		<i>Non-Pulmonary</i>		<i>Total</i>
	<i>M.</i>	<i>F.</i>	<i>M.</i>	<i>F.</i>	
(a) Total number of cases on register:					
5th July, 1948	120	81	59	56	316
31st December, 1950	131	97	54	57	339
(b) Removals from register, 5th July, 1948, to 31st December, 1950:					
Died	23	11	5	3	42
Left district	13	14	6	4	37
Lost sight of	2	—	1	1	4
Recovered	3	3	4	5	15
Colonised at Wrenbury	2	—	—	—	2
	43	28	16	13	100
(c) Number of notifications received 5th July, 1948, to 31st December, 1950:					
New cases	41	33	11	13	98
Transfers	10	9	—	1	20
Restored to register	3	2	—	—	5
	54	44	11	14	123

Of the number of contacts (160) of tuberculous patients referred to the chest clinics for examination, 4 were found to be suffering from pulmonary tuberculosis.

Care of the Aged

The care and after-care of old people living on their own is becoming more and more a difficult problem, but in conjunction with general practitioners, assistance has been given to have cases admitted to a suitable hospital or hostel, or where this has not been possible, the provision of a domestic help, and a visit by the district nurse.

Whenever there are relations and friends, contact is made with them, if required, so that they can be reminded of their responsibility in the care of the old people and more help can and should be given by relatives in many cases.

As previously mentioned, patients are encouraged to arrange for someone to live in whenever possible and practicable.

The "Over 60" Club in Runcorn does very good work in the care of old people and their work could, with advantage, be copied elsewhere in the Division. In addition Women's Institutes, Townswomen's Guilds and church organisations take an interest in old people's welfare, working in conjunction with ward and parish councils.

Loan of nursing equipment

As previously reported, a supply of nursing equipment, apparatus, etc., is available for loan to patients from stocks supplied to district nurses in accordance with the scale agreed to by the Cheshire County Council and my Committee. A reserve stock is also kept at my Divisional Office.

A patient borrowing equipment under the above heading is required to pay a deposit, which is refunded when the article is returned in good condition.

The number of articles loaned to patients during the year was 125.

There was a large increase in the number of articles loaned during 1950.

Home occupation

In a few cases where patients are suffering from prolonged disability, resultant upon injury or sickness, arrangements have been made, in conjunction with the chest physicians and/or the patient's medical practitioner, and the British Red Cross Society for the supply of materials and apparatus for home occupation.

Health education

Copies of my pamphlet "Commonsense Preventive Measures Against Disease" have been widely distributed throughout the Division, and posters on health education matters have been forwarded to shops, etc., for display.

Pamphlets are also left at homes where there are cases of infectious disease, giving details of the precautions to be taken to avoid the spread of infection.

Health matters on the wireless, Central Office of Information films, articles in the Press and magazines have aided health education, but the health visitors' personal visits and talks in the home are the most important means of spreading health education. The matron of the day nursery, Runcorn, and staff also greatly assist in this matter, in addition, midwives, district nurses and sanitary inspectors.

SECTION 29 — DOMESTIC HEALTH SERVICE

The number of domestic helps available at the 31st December, 1950, was 4 full-time and 19 part-time.

There has been a considerable increase in the number of cases supplied with domestic helps during the year, especially for old people living on their own, and, during the December quarter, for cases of illness.

All applicants are visited by the health visitors and a full enquiry made as to the need for the services of a domestic help, and only where this is absolutely necessary is a domestic help supplied. All protracted cases are visited at regular intervals to ascertain whether the services of a domestic help are still necessary.

The number of cases attended during the year was 120, subdivided as follows:—

<i>Confinement</i>	<i>Tuberculosis</i>	<i>Aged</i>	<i>Cases of</i>
<i>Cases</i>	<i>Cases</i>	<i>Persons</i>	<i>Other Illness</i>
38	4	21	57

In connection with confinement cases the domestic help is usually booked for 10 full days, and if the medical condition of the patient is such that it is advisable to extend the period, the necessary arrangements are made.

For the other types of cases for which domestic helps are required, the cases are carefully considered and domestic helps supplied for a specified number of hours per week, depending on the requirements of the case. In certain cases of illness it is essential that domestic helps are supplied on a full-time basis, especially where there are young children in the house.

This service is not free to the patient, but subject to a "means" test.

Where any hardship is claimed after the assessment, the case is referred to the Divisional Health Committee for their decision in the matter.

